



Conformance Clarification for EHR Certification of Electronic
Syndromic Surveillance
ADT MESSAGES A01, A03, A04, and A08
HL7 Version 2.5.1

Erratum to the CDC PHIN 2.0 Implementation Guide
August 2015

ERRATUM TO THE CDC PHIN 2.0 MESSAGING GUIDE, APRIL
2015 RELEASE FOR SYNDROMIC SURVEILLANCE:
EMERGENCY DEPARTMENT, URGENT CARE, INPATIENT
AND AMBULATORY CARE SETTINGS

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The original messaging guide can be found at <http://www.cdc.gov/nssp/mmg/index.html>

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Public Health Information Network (PHIN) Messaging Guide for Syndromic Surveillance: Emergency Department, Urgent Care, Inpatient and Ambulatory Care Settings (Release 2.0) — Addendum
Conformance Clarification for Electronic Health Record (EHR) Certification of Electronic Syndromic Surveillance

This addendum consolidates the Centers for Disease Control and Prevention's (CDC's) PHIN Messaging Guide for Syndromic Surveillance: Emergency Department, Urgent Care, Inpatient and Ambulatory Care Settings (Release 2.0) (PHIN MG) information and clarifies existing conformance requirements. Conformance statements and conditional predicates that clarify message requirements are presented below. Value set requirements, general clarifications, and PHIN MG errata are also provided in this addendum.

1 CONFORMANCE STATEMENTS

The following table summarizes changes or additions to the conformance statements for specific electronic syndromic surveillance message elements from all care settings (e.g., hospital emergency departments or urgent care centers, inpatients or ambulatory care).

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
1.1	53	Section 3.6.1 MSH Segment – MSH-1 Field Separator	Default value is , (ASCII 124). <i>Make this a Conformance Statement</i>	Conformance Statement SS-043: MSH-1 (Field Separator) SHALL be the literal value: ' ', (ASCII 124).
1.2	53	Section 3.6.1 MSH Segment – MSH-2 Encoding Characters	Default values are ^~\& (ASCII 94, 126, 92, and 38, respectively). <i>Make this a Conformance Statement</i>	Conformance Statement SS-044: MSH-2 (Encoding Characters) SHALL be the literal value: '^~\&', (ASCII 94, 126, 92, and 38, respectively).
1.3	61	Section 3.6.3 PID Segment - PID-5 Patient Name	Conformance Statement SS-023: PID-5 (Patient Name) SHALL be valued with only the constant value "S" or "U" in PID-5.7 Name Type (i.e., PID-5 shall be valued as ~^~^~^S or ~^~^~^U). <i>Comment: Not clear</i>	Conformance Statement SS-023: PID-5 (Patient Name) SHALL be valued as ~^~^~^S or ~^~^~^U).
1.4	76	Section 3.6.6 Diagnosis Segment - DG1.6 Diagnosis Type	Conformance Statement SS-040 DG1-6 (Diagnosis Type) SHALL be either A, F or W. <i>Update Conformance Statement</i>	Conformance Statement SS-040: DG1-6 (Diagnosis Type) SHALL be either A (Admitting), F (Final) or W (Working).
1.5	81	SECTION 3.6.8 Observation Segment – OBX-1 Set ID	Conformance Statement SS-027: OBX segment, the sequence number SHALL be one (1), for the second repeat, the sequence number shall be two (2), etc. Example: OBX 1 OBX 2 OBX 3	Conformance Statement SS-027: OBX-1 (Set ID) for the first occurrence of an OBX Segment SHALL have the Literal Value of '1'. Each following occurrence SHALL be numbered consecutively.
1.6	91	SECTION 3.8 USAGE CONFORMANCE TESTING RECOMMENDATIONS	3.8 USAGE CONFORMANCE TESTING RECOMMENDATIONS <i>Suggestion to Change Section 3.8 to (or add Section 3.9) 'Conformance Rules for Specifying Usage'; also recommendation to move current Section 3.8 to an earlier part of Guide to replace the usage section in Table 3.3, pages 33-34</i>	3.8 name change to CONFORMANCE RULES FOR SPECIFYING USAGE; Table 3.3 will be updated with the Usage from 3.8
1.7	81	SECTION 3.6.8 Observation Segment (OBX) OBX-1 Set ID	Conformance Statement SS-027: OBX segment, the sequence number SHALL be one (1), for the second repeat, the sequence number shall be two (2), etc. Example: OBX 1 OBX 2	Conformance Statement SS-027: OBX-1 (Set ID) for the first occurrence of an OBX Segment SHALL have the Literal Value of '1'. Each following occurrence SHALL be numbered consecutively.

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
			<p>OBX 3</p> <p><i>Set ID Description should be consistent, the following version is clear and I'd suggest to use where it applies.</i></p> <p>Conformance Statement SS-032: DG1-1 (Set ID) for the first occurrence of a DG1 Segment SHALL have the Literal Value of '1'. Each following occurrence SHALL be numbered consecutively.</p>	
1.8	78	SECTION 3.6.7 Procedures Segment (PR1) PR1-1 Set ID	<p>Definition: This field contains the number that identifies this transaction.</p> <p>Conformance Statement SS-034: For the first occurrence of the segment the sequence number shall be 1, for the second occurrence it shall be 2, etc.</p> <p><i>Set ID Description should be consistent, the following version is clear and I'd suggest to use where it applies.</i></p> <p>Conformance Statement SS-032: DG1-1 (Set ID) for the first occurrence of a DG1 Segment SHALL have the Literal Value of '1'. Each following occurrence SHALL be numbered consecutively.</p>	<p>Conformance Statement SS-034: PR1-1 (Set ID) for the first occurrence of a PR1 Segment SHALL have the Literal Value of '1'. Each following occurrence SHALL be numbered consecutively.</p>
1.9	85	SECTION 3.6.9 Insurance Segment (IN1) IN1-1 Set ID	<p><i>Set ID Description should be consistent, the following version is clear and I'd suggest to use where it applies.</i></p> <p>Conformance Statement SS-032: DG1-1 (Set ID) for the first occurrence of a DG1 Segment SHALL have the Literal Value of '1'. Each following occurrence SHALL be numbered consecutively.</p>	<p>Currently, IN1 is optional and will not be tested for conformance. May add a Conformance statement for future versions.</p> <p>Conformance Statement SS-TBD: IN1-1 (Set ID) for the first occurrence of an OBX Segment SHALL have the Literal Value of '1'. Each following occurrence SHALL be numbered consecutively.</p>

2 CONDITION PREDICATES

This section clarifies and formalizes the format in which condition predicates are specified for conformance testing. C(a/b) is used to define conditionals as indicated in Section 3.8 of the guide, which is pre-adopted from HL7 V2.7.1 Conformance (Chapter 2B, 2.B.7.5)

2.1 Message Element Attributes – Usage

The Message Element Attributes table on page 33 has this content for the Usage:

Usage of the message element for this profile. Indicates whether the message element (segment, segment group, field, component, or subcomponent) is Required, Optional, Not Supported, or Conditional in the corresponding message element. Usage applies to the message attribute table, data type attribute table and the segment attribute table; see Section 3.8 Usage Conformance Testing Recommendations.

Legal values are:

R - Required, Must always be populated

RE-Required, but may be empty. If the Sender has data, it must be sent. The Receiver must be capable of processing data if sent, and must not raise an error or warning if the data is not sent.

C – Conditionally Required (see Section 3.8 for more details)

CE – Conditionally Required but may be empty. The Receiver must be capable of processing data if sent, and must not raise an error or warning if the data is not sent.

X – Not supported

O – Optional; there are no specified conformance rules for either Sender or Receiver for this segment in this guide. As an implemented interface must follow known rules for populating segments, a specific interface for a particular Sender or Receiver must constrain this usage to either R, RE, C, CE, or X. This has been deliberately left unconstrained in this guide to support differing and sometimes mutually exclusive statutory requirements in different jurisdictions; this must be determined locally.

2.2 Message Element Attributes – Usage Revisions

Usage on page 33 will be replaced with this content in the next version:

Usage of the message element for this profile. Indicates whether the message element (segment, segment group, field, component, or subcomponent) is Required, Optional, Not Supported, or Conditional in the corresponding message element. Usage applies to the message attribute table, data type attribute table and the segment attribute table; see HL7 V2.7.1 Conformance (Chapter 2B, 2.B.7.5), Usage Conformance Testing Recommendations.

Message content is governed by the cardinality specification associated (explicitly or implicitly) with each element of an HL7 message. Usage rules govern the expected behavior of the sending application and receiving application with respect to the element. The usage codes expand/clarify the optionality codes defined in the HL7 standard. Usage codes are employed in a message profile to constrain the use of elements defined in the standard. The usage code definitions are given from a sender and receiver perspective and specify implementation and operational requirements.

The standard allows broad flexibility for the message structures that HL7 applications must be able to receive without failing. But while the standard allows that messages may be missing data elements or may contain extra data elements, it should not be inferred from this requirement that such messages are conformant. In fact, the usage codes specified in a message profile place strict conformance requirements on the behavior of the application.

Usage Rules for a Sending Application

Optionality/Usage Indicator	Description	Implementation Requirement	Operational Requirement
R	Required	The application shall implement "R" elements.	The application shall populate "R" elements with a non-empty value.
RE	Required but may be empty	The application shall implement "RE" elements.	The application shall populate "RE" elements with a non-empty value if there is relevant data. The term "relevant" has a confounding interpretation in this definition ¹ .
C(a/b)	Conditional	<p>An element with a conditional usage code has an associated condition predicate (See section 2.B.7.9, "Condition predicate" that determines the operational requirements (usage code) of the element.</p> <p>If the condition predicate associated with the element is true, follow the rules for <i>a</i> which shall be one of "R", "RE", "O" or X":</p> <p>If the condition predicate associated with the element is false, follow the rules for <i>b</i> which shall be one of "R", "RE", "O" or X".</p> <p><i>a</i> and <i>b</i> can be valued the same.</p>	
X	Not supported	The application (or as configured) shall not implement "X" elements.	The application shall not populate "X" elements.
O	Optional	None. The usage indicator for this element has not yet been defined. For an implementation profile all optional elements must be profiled to R, RE, C(a/b), or X.	Not Applicable.

¹ There are multiple interpretations of "RE" when a value is known. One is "the capability must always be supported and a value is sent if known", the other is "the capability must always be supported and a value may or may not be sent even when known based on a condition external to the profile specification. The condition may be noted in the profile but cannot be processed automatically". This is what can be interpreted from the "relevant" part of the definition. Regardless of the interpretation the "RE" usage code, a set of test circumstances can be developed to sufficiently test the "RE" element. See the "Conformity Assessment of Conformance Constructs" section for more details.

Usage Rules for a Receiving Application

Optionality/Usage Indicator	Description	Implementation Requirement	Operational Requirement
R	Required	The application shall implement "R" elements.	<p>The receiving application shall process (save/print/archive/etc.) the information conveyed by a required element.</p> <p>A receiving application shall raise an exception due to the absence of a required element. A receiving application shall not raise an error due to the presence of a required element.</p>
RE	Required but may be empty	The application shall implement "RE" elements.	<p>The receiving application shall process (save/print/archive/etc.) the information conveyed by a required but may be empty element. The receiving application shall process the message if the element is omitted (that is, an exception shall not be raised because the element is missing).</p>
C(a/b)	Conditional	<p>The usage code has an associated condition predicate true (See section 2.B.7.9, "Condition predicate").</p> <p>If the condition predicate associated with the element is true, follow the rules for <i>a</i> which shall one of "R", "RE", "O" or "X":</p> <p>If the condition predicate associated with the element is false, follow the rules for <i>b</i> which shall one of "R", "RE", "O" or "X".</p> <p><i>a</i> and <i>b</i> can be the same.</p>	
X	Not supported	The application (or configured) shall not implement "X" elements.	<p>None, if the element is not sent.</p> <p>If the element is sent the receiving application may process the message, shall ignore the element, and may raise an exception. The receiving application shall not process (save/print/archive/etc.) the information conveyed by a not-supported element.</p>
O	Optional	None. The usage indicator for this element has not yet been defined. For an implementation profile all optional elements must be profiled to R, RE, C(a/b), or X.	None.

2.3 Condition Predicate Changes

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
2.1	33	3.3 Message Element Attributes - Usage	Current Usage Used the older HL7 notation	Revised Usage Uses the pre-adopted HL7 2.7.1 conformance notation
2.2	56	Section 3.6.1 MSH Segment MSH-15	MSH-15 Accept Acknowledgement Type Usage =C	Usage is C(R/X) with the Condition Rule: For MSH-21 Message Profile ID PH_SS-Ack^SS Sender^2.16.840.1.114222.4.10.3^ISO or PH_SS-Ack^SS Receiver^2.16.840.1.114222.4.10.3^ISO
2.3	56	Section 3.6.1 MSH Segment MSH-16	MSH-16 Application Acknowledgement Type Usage =C	Usage is C(R/X) with the Condition Rule: For MSH-21 Message Profile ID PH_SS-Ack^SS Sender^2.16.840.1.114222.4.10.3^ISO or PH_SS-Ack^SS Receiver^2.16.840.1.114222.4.10.3^ISO
2.4	63	TABLE 3.6.3 PID Segment Definition PID-29	Condition Predicate: If PV1-36 (Discharge Disposition) is valued with any of the following: '20', '40', '41', '42' and PID-29 (Patient Death and Time) SHALL be populated.	Condition Predicate: If PV1-36 (discharge disposition) is valued with any of the following: '20', '40', '41', '42'
2.5	79	TABLE 3.6.7 PROCEDURES SEGMENT (PR1)	Usage = CE Condition Predicate: If PR1-3.1 (the identifier) is provided then PR1-3.3 is valued.	Usage = C(R/X) Condition Predicate: If PR1-3.1 (the identifier) is populated.
2.6	83	TABLE 3.6.8 OBSERVATION RESULT SEGMENT (OBX)	Condition Predicate: If OBX.2 (Value Type) is valued "NM", the units field is required.	Usage = C(R/X) Condition Predicate: If OBX.2 (Value Type) is valued "NM".

3 DATATYPE DEFINITIONS

This section clarifies the datatype definitions in Section 3.4 of the guide.

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
3.1	35	Table 3.4.1 Datatype definitions – CE – Coded Element CE.6 component	Condition Predicate: If CE.3(Identifier) is valued. Usage=C Condition Predicate: If CE.4 (Alternate Identifier) is valued. Usage=C	Condition Predicate (for CE.3): If CE.1 (Identifier) is valued. Usage (for CE.3) =C(R/X). Condition Predicate (for CE.6): If CE.4 (Alternate Identifier) is valued. Usage (CE.6) =C(R/X).
3.2	36	Table 3.4.2 Datatype definitions – CWE – Coded With Exceptions	Condition Predicate: If CE.1 (Identifier) is valued. Condition Predicate: If CE.3 (Identifier) is valued. <i>CE is incorrect, CWE is correct data type, conditional usage denotation on CWE.3 and CWE.6 incorrect</i>	Condition Predicate (for CWE.3): If CWE.1 (Identifier) is valued. Usage (for CWE.3) =C(R/X) Condition Predicate (for CWE.6): If CWE.4 (Alternate Identifier) is valued. Usage (for CWE.6)=C(R/X)

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
3.1	37	Table 3.4.3 Datatype definitions – CX	CX.4 Assigning Authority datatype = ST	CX.4 Assigning Authority datatype = HD
3.2	37	Table 3.4.4 Datatype definitions – DT	Usage = RE DT (datatype) = DT	Usage = ‘—’ DT (datatype column) = ‘—’
3.3	38	Table 3.4.5 Datatype definitions – DTM	Usage = RE DT (datatype) = DTM	Usage = ‘—’ DT (datatype column) = ‘—’
3.4	39	Table 3.4.6 Datatype definitions - EI	EI.2 Namespace ID usage = R	EI.2 Namespace ID usage = RE
3.5	40	Table 3.4.7 Datatype definitions – HD Usage Notes	Note that the HD data type has been constrained to carry an OID identifying an application, a facility, or an assigning authority.	Removed this comment
3.6	40	Table 3.4.8 Datatype definitions – ID	Usage = R	Usage = ‘—’
3.7	40	Table 3.4.9 Datatype definitions – IS	Usage = R	Usage = ‘—’
3.8	41	Table 3.4.11 Datatype definition – NM	Usage = R DT (datatype) = ST On NM datatype: (TBL#) 0076 is “Message type” (typo)	Usage = ‘—’ DT (datatype column) = ‘—’ Removed TBL# 0076 reference
3.9	41	Table 3.4.13 Datatype definitions – SI	Usage = R DT (datatype) = NM	Usage = ‘—’ DT (datatype column) = ‘—’
3.10	41	Table 3.4.14 Datatype definitions – ST	Usage = R DT (datatype) = NM	Usage = ‘—’ DT (datatype column) = ‘—’
3.11	41	Table 3.4.12 Datatype definitions PT- Processing Type Example	Example: MSH-10 Processing ID: D or P or T .	Example: MSH-11 Processing ID: D or P or T .
3.12	42	Table 3.4.16 Datatype definitions –TX	Usage = R	Usage = ‘—’
3.13	43	Table 3.4.19 Datatype definitions – XCN Extended Coded Name	XCN.8 Source Table Usage = C	XCN.8 Source Table Usage = O

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
3.14	43	Table 3.4.18 Datatype definitions – XAD Extended Address	Add value set reference here for component 4, 6, and 9.; also be precise if different for different message elements. Recommend not to include example data for optional elements. IN RE: State component in the example Question: What does the 13 represent here? Expecting a state abbr. (unless this is a code for a state).	Added value set references for State or Province (XAD.4), Country (XAD.6), County/Parish Code (XAD.9) Removed the address type component in the example Noted the question about the use of the FIPS numeric code for state, but adding the value set should clarify that the numeric FIPS code is expected here, and not the alpha state abbreviation.
3.15	43-44	Table 3.4.19 Datatype definitions – XCN Extended Coded Name – XCN.8	XCN.8 Source Table Usage is C in the standard and here in the datatype definitions.	XCN.8 Source Table Usage was changed to O
3.16	44-45	Table 3.4.20 Datatype definitions – XPN Extended Person Name	Missing usage for 1 st 7 elements. Condition predicate needs to be clarified.	Updated with usage for XPN Extended Person Name as described; removed the value set reference and pulled the Usage Notes up into the comments cell in line with XPN.7. Usage XPN.7= C(R/X) Condition Predicate: 2 nd occurrence of the name field Note: For this implementation, the only acceptable values in PID-5 Patient Name are name type values of "S" ~^~^~^S or "U" ~^~^~^U

4 SEGMENT DETAIL CHANGES

General changes within Section 3.6 Segment Definitions are listed in this section.

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
4.1	55	Table 3.6.1 MESSAGE HEADER (MSH) SEGMENT – MSH-9	Message Type breakdown by component <i>MSH 9.1, 9.2, and 9.3 are redundant here as the same information is available in the data type definition.</i>	Remove the component rows in the next release
4.2	56	TABLE 3.6.1 Message Header Segment – MSH-15 Accept Acknowledgment	Usage = CE; Cardinality = [0..1] HL7 table 0155: HL7 defined: Accept/application acknowledgment conditions	Usage = varies; Cardinality = varies HL7 table 0155: HL7 defined: Accept/application

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		Type	<p>Condition Rule: For MSH-21 Message Profile ID PH_SS-Ack^SS Sender^2.16.840.1.114222.4.10.3^ISO or PH_SS-Ack^SS Receiver^2.16.840.1.114222.4.10.3^ISO, the ADT and ORU message must be valued with the literal value "AL". Must be left empty for the Accept Acknowledgment.</p>	<p>acknowledgment conditions <u>PH_SS-Ack^SS Sender Profile</u> <u>Message Types = ADT^A01, ADT^A03, ADT^A04, ADT^A08, ORU^R01</u> Usage = R, Constant = AL, Card = [1..1]</p> <p><u>PH_SS-NoAck^SS Sender Profile</u> <u>Message Types = ADT^A01, ADT^A03, ADT^A04, ADT^A08, ORU^R01</u> Usage = R, Constant = NE, Card = [1..1]</p> <p><u>Message Type = ACK^A01, ACK^A03, ACK^A04, ACK^A08, ACK^R01</u> Usage = X, Card = [0..0]</p> <p>Usage Note: For MSH-21 Message Profile ID PH_SS-Ack^SS Sender^2.16.840.1.114222.4.10.3^ISO or PH_SS-Ack^SS Receiver^2.16.840.1.114222.4.10.3^ISO, the ADT and ORU message must be valued with the literal value "AL". Must be left empty for the Accept Acknowledgment.</p>
4.3	56	TABLE 3.6.1 Message Header Segment – MSH-16 Application Acknowledgment Type	<p>Usage = CE; Cardinality = [0..1]</p> <p>HL7 table 0155: HL7 defined: Accept/application acknowledgment conditions</p> <p>Condition Rule: For MSH-21 Message Profile ID PH_SS-Ack^SS Sender^2.16.840.1.114222.4.10.3^ISO or PH_SS-Ack^SS Receiver^2.16.840.1.114222.4.10.3^ISO, the ADT and ORU message should be populated from HL7 Table 0155 – Accept/Application Acknowledgment Conditions. Must be left empty for the Accept Acknowledgment.</p> <p><i>Needs clarification.</i></p>	<p>Usage = varies; Cardinality = varies</p> <p>HL7 table 0155: HL7 defined: Accept/application acknowledgment conditions <u>PH_SS-Ack^SS Sender Profile</u> <u>Message Types = ADT^A01, ADT^A03, ADT^A04, ADT^A08, ORU^R01</u> Usage = RE, Card = [0..1]</p> <p><u>Message Type = ACK^A01, ACK^A03, ACK^A04, ACK^A08, ACK^R01</u> Usage = X, Card = [0..0]</p> <p>Usage Note: For MSH-21 Message Profile ID PH_SS-Ack^SS Sender^2.16.840.1.114222.4.10.3^ISO</p>

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
				SO or PH_SS-Ack^SS Receiver^2.16.840.1.114222.4.10.3^ISO, the ADT and ORU message should be populated from HL7 Table 0155 – Accept/Application Acknowledgment Conditions. Must be left empty for the Accept Acknowledgment.
4.4	56	Table 3.6.2 EVENT (EVN) SEGMENT – EVN-1	EVN-1 Usage = RE <i>Why is this RE usage? It is the same value as MSH-9.2 therefore it is always known. Seems that it needs to be R (although it is conveying redundant information) or O (but not RE).</i>	EVN-1 Usage = O with the comment as follows: This field had been retained for backward compatibility only. Use the second component (trigger event) of MSH-9 - Message Type to transmit event type code information.
4.5	58	Table 3.6.3 PID Segment – Ethnic Group	PID-22 Ethnic Group Usage = [0..1*] <i>Usage close-bracket missing – question regarding [0..1], or [0..*] usage</i>	PID-22 Ethnic Group Usage = [0..*]
4.6	62	Table 3.6.3 PID Segment Definition PID-29 Patient Death and Time	Usage=CE (A03) Usage=CE (A08) Usage=CE (A04) Usage=X (A01) Conformance Statement SS-036: If valued, PID-29 (Patient Death and Time), SHALL be expressed with a minimum precision of the nearest minute and be represented in the following format: 'YYYYMMDDHHMM[SS.S[S[S[S]]]] [+/- ZZZZ]' Condition Predicate: If PV1-36 (Discharge Disposition) is valued with any of the following: '20', '40', '41', '42' <i>Conformance Statement and Condition Predicate needs to be clarified and updated</i>	Usage=C(R/RE) (A03) Usage=C(R/RE) (A08) Usage=C(R/RE) (A04) Usage=X (A01) Definition: This field contains the date and time at which the patient death occurred. This field shall not be populated on an admission message. A03, A04, A08 Conformance Statement: Conformance Statement SS-036: If valued, PID-29 (Patient Death and Time), SHALL be expressed with a minimum precision of the nearest minute and be represented in the following format: 'YYYYMMDDHHMM[SS.S[S[S[S]]]] [+/- ZZZZ]' A03, A04, A08 Condition Predicate Condition Predicate: If PV1-36 (Discharge Disposition) is valued with any of the following: '20', '40', '41', '42'.
4.7	63	Table 3.6.3 PID Segment Definition PID-30 Deceased Indicator	Usage=CE (A03) Usage=CE (A08)	Usage=C(R/RE) (A03) Usage=C(R/RE) (A08)

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
			Usage=CE (A04) Usage=X (A01) Definition: This field indicates whether the patient is deceased. Y the patient is deceased N the patient is not deceased This field shall not be populated on an admission message. Conformance Statement SS-037: If valued, PID-30 (Patient Death Indicator) SHALL be valued to the Literal Value 'Y'. Condition Predicate: If PV1-36 (Discharge Disposition) is valued with any of the following: '20', '40', '41', '42' <i>Conformance Statement and Condition Predicate needs to be clarified and updated</i>	Usage=C(R/RE) (A04) Usage=X (A01) Definition: This field indicates whether the patient is deceased. Y the patient is deceased N the patient is not deceased This field shall not be populated on an admission message. A03, A04, A08 Conformance Statement Conformance Statement SS-037: If PV1-36 (Discharge Disposition) is valued with any of the following: '20', '40', '41', '42' then PID-30 (Patient Death Indicator) SHALL be valued to the Literal Value 'Y'. A03, A04, A08 Condition Predicate Condition Predicate: If PV1-36 (Discharge Disposition) is valued with any of the following: '20', '40', '41', '42'
4.8	63	Table 3.6.3 All PID-fields w 'X' Usage	Many PID-fields have incorrect cardinality for usage 'X'	Will change all PID-fields that have usage 'X' (not supported) to [0..0] in future release
4.9	61 – 64	Table 3.6.4 All PV1-fields w 'X' Usage	Many PV1-fields have incorrect cardinality for usage 'X'	Will change all PV1-fields that have usage 'X' (not supported) to [0..0] in future release
4.10	65 - 68	Table 3.6.5 All PV2-fields w 'X' Usage	Many PV2-fields have incorrect cardinality for usage 'X'	Will change all PV2-fields that have usage 'X' (not supported) to [0..0] in future release
4.11	70 - 73	Table 3.6.4 PV1 Segment - PV1-1 Set ID - PV1	Conformance Statement SS-024: PV1-1 (Set ID) SHALL have the Literal Value of '1' <i>Conflict between conformance statement and usage/cardinality. Make usage R and cardinality 1...1. RE doesn't make since in this case since this is an operational (system) thing.</i>	Changed usage to R and changed cardinality to [1..1] to match the requirement in the associated Conformance Statement SS-024.
4.12	65	Section 3.6.4 PV1 Segment PV1-36 Discharge Disposition Usage and Cardinality Updates for A01, and A04	R (A03) RE (A08) X (A04, A01) <i>A04 usage is a problem. It is in conflict with PID 29 and 30. Make this RE.</i>	A03 Usage=R , Cardinality = [1..1] A08 Usage=RE , Cardinality = [0..1] A04 Usage=RE , Cardinality = [0..1] (change from Usage = X) A01 Usage= X, Cardinality [0..0]

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
4.13	67	Section 3.6.4 PV1 Segment PV1-45 Discharge Date/Time	Conformance Statement SS-012: If present in the A08, PV1-45 (Discharge Date/Time) SHALL be expressed with a minimum precision of the nearest minute and be represented in the following format: 'YYYYMMDDHHMM[SS[.S[S[S[S]]]]][+/-ZZZZ]' <i>Redundant. SS-045. It is implied that if this element is valued in the A08 then it shall follow this format (since it is RE, no need to say it...).</i>	Removed this redundant conformance statement from Section 3.6.4 and the list of conformance statements in Section 7 Appendix C.
4.14	68	Section 3.6.5 PV2Segment PV2-3 Admit Reason reference to canned text	If a drop-down menu of canned admit reason text is used, it is communicated in component 3.2. If only Free Text is used, it is communicated in component 3.2. <i>Comment conflict to support 3 coding systems</i>	Clarification: If there is not a code in one of the 3 value sets specified that captures the concept trying to be conveyed, then free text is allowed to be used and it is communicated in component PV2-3.2
4.15	71	Table 3.6.4 PV1 Segment PV2-3 condition predicate	Condition Predicate: If PV2-3.1 (the identifier) is provided then PV2-3.3 is valued. <i>This is misplaced and is already handled in the definition of the CE data type.</i>	Will remove the redundant Condition Predicate in future version
4.16	71	Table 3.6.5 PV2-3 Admit Reason	TABLE 3.6.5 PATIENT VISIT PV2-3 Admit Reason value set reference to ICD-10: PHVS_CauseOfDeath_ICD-10_CDC The list provides ICD-10 codes and associated cause-of-death titles for the most detailed listing of causes of death. This list is maintained by CDC NCHS. <i>Current version references an obsolete ICD-10 value set.</i>	New Value Set: PHVS_AdministrativeDiagnosis_CDC_ICD-10CM
4.17	74	Table 3.6.6 Diagnosis (DG1) Segment DG1.3 Diagnosis Code - DG1	Condition Predicate: If the DG1 Segment is provided, DG1-3 (Diagnosis) is required to be valued. <i>Remove. This is not a conditional and the statement is redundant based on the facts that this element has usage of R and DG1 is RE, so is DG1 is valued then this element is required. This is just part of the basic HL7 conformance model, so explicitly repeating a requirement such as this is not a good idea.</i>	Will remove the redundant Condition Predicate in future version

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
4.18	75	Section 3.6.6 Diagnosis (DG1) Segment DG1.3.3 Diagnosis Code - DG1, Name of Coding System	Condition Predicate: If DG1-3.1 (the identifier) is provided then DG1-3.3 is valued. Condition Predicate provided for a required element. Update/remove Condition Predicate.	Will remove the redundant Condition Predicate in future version
4.19	76	Section 3.6.6 Diagnosis (DG1) Segment DG1-3.4-3.6 DG1-4 DG1-7 through DG1-21	DG1-3.4-3.6, DG1-4, DG1-7 through DG1-21 DG1 Fields with Usage=X and Cardinality =[0..1] <i>Cardinality on fields and components should be [0..0] where Usage = X (Not Supported)</i>	Will correct Cardinality where Usage=X to [0..0] in future version
4.20	75 - 77	Section 3.6.6 Diagnosis (DG1) Segment DG1.6 Diagnosis Type	Condition Predicate: If the DG1 Segment is provided, DG1-6 (Diagnosis Type) is required to be valued. Condition Predicate provided for a required element. Update/remove Condition Predicate.	Will remove the redundant Condition Predicate in future version
4.21	76	TABLE 3.6.7 PROCEDURES SEGMENT (PR1) – PR1-3.3 (Name of Coding System)	Usage = CE Condition Predicate: If PR1-3.1 (the identifier) is provided then PR1-3.3 is valued. Usage and cardinality need to be updated (note: segment is optional, and will not be tested); Listed as an optional 'Syndromic data elements of interest' (Table 4-2, page 111), implementation notes narrative indicated conflict of define usage/cardinality currently defined	Usage = C(R/X) Condition Predicate: If PR1-3.1 (the identifier) is valued, the Name of Coding System PR1-3.3 shall be provided
4.22	79	Section 3.6 Segment Detail	Usage = X with Cardinality = [0..1] <i>Cardinality on fields and components should be [0..0] where Usage = X (Not Supported)</i>	In all cases where Usage = X, Cardinality = [0..0].
4.23	53 - 88	SECTION 3.6.8 Observation Segment (OBX) OBX-2 Value Type	Definition: This field contains the format of the observation value in OBX. Note: Identifies the structure of data in observation value (OBX.5) <i>Do you mean OBX-5? Seems this statement and the next can be combined.</i>	Definition: This field contains the format of the observation value in OBX-5.
4.24	81	SECTION 3.6.8 Observation Result Segment (OBX)	Usage for OBX-3 Observation Identifier is "CE" and the 2.5.1 standard says it	OBX-3 Observation Identifier Usage=R

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
		OBX-3 Observation Identifier	is a required field. This is a typo.	
4.25	81	SECTION 3.6.8 Observation Result Segment (OBX) OBX-5 Observation Value	<p>When OBX-2=TS, OBX-5 data is specified as follows: Datatype=DTM , Usage = RE</p> <p>When OBX-2=TX, OBX-5 data is specified as follows: Datatype=TX, Usage = RE</p> <p>When OBX-2=NM, OBX-5 value is specified as follows: Datatype=ST, Usage = RE</p> <p>OBX-5 data is specified as follows: ST</p> <p><i>Comment on TS: This is really a primitive and should be R. Same goes with TX and ST. Usage is implied to be R since this is a leaf node.</i></p>	<p>When OBX-2=TS, OBX-5 value is specified as follows: Datatype=DTM , Usage = R</p> <p>When OBX-2=TX, OBX-5 value is specified as follows: Datatype=TX, Usage = R</p> <p>When OBX-2=NM, OBX-5 value is specified as follows: Datatype=ST, Usage = R</p>
4.26	81 - 83	SECTION 3.6.8 Observation Result Segment (OBX) OBX-6 Units	<p>Conformance Statement SS-029: If OBX 3.1 (Observation Identifier) is valued with 21612-7, then OBX-6.1 (Unit Identifier) SHALL be valued to a member of the set: PHVS_AgeUnit_SyndromicSurveillance</p> <p>Conformance Statement SS-030: If OBX 3.1 (Observation Identifier) is valued with 11289-6 then OBX-6.1 (Identifier) SHALL be valued to a member of the set: PHVS_TemperatureUnit_UCUM</p> <p>Conformance Statement SS-031: If OBX 3.1 (Observation Identifier) is valued with 59408-5 then OBX-6.1 (Identifier) SHALL be valued to a member of the set: PHVS_PulseOximetryUnit_UCUM</p> <p>OBX-6.3 will contain the code system code 'UCUM' for any unit values given. <i>Link not working on first value set.</i> <i>Update OBX-3 Description/Comments section to include updated Conformance Statements SS-029 through SS-031, similar to co-constraint and related field OBX-6 (Units). Explicitly identify 11289-6 (XXX) and replace "XXX" within SS-030</i></p>	<p>Conformance Statement SS-029: If OBX 3.1 (Observation Identifier) is valued with 21612-7 AGE-REPORTED (LOINC), then OBX-6.1 (Unit Identifier) SHALL be valued to a member of the set: PHVS_AgeUnit_SyndromicSurveillance</p> <p>Conformance Statement SS-030: If OBX 3.1 (Observation Identifier) is valued with 11289-6 BODY TEMPERATURE, INITIAL (LOINC) then OBX-6.1 (Identifier) SHALL be valued to a member of the set: PHVS_TemperatureUnit_UCUM</p> <p>Conformance Statement SS-031: If OBX 3.1 (Observation Identifier) is valued with 59408-5 OXYGEN SATURATION IN ARTERIAL BLOOD BY PULSE OXIMETRY (LOINC), then OBX-6.1 (Identifier) SHALL be valued to a member of the set: PHVS_PulseOximetryUnit_UCUM</p> <p>OBX-6.3 will contain the code system code 'UCUM' for any unit values given.</p>
4.27	83	TABLE 3.6.8 OBSERVATION RESULT SEGMENT (OBX), OBX-6 Units	<p>Condition Predicate: If OBX.2 (Value Type) is valued "NM", the units field is required.</p> <p><i>Update usage on condition predicate and narrative to reflect conditional</i></p>	<p>Usage = C(R/X)</p> <p>Condition Predicate: If OBX.2 (Value Type) is valued "NM" Units (OBX-6) shall be provided.</p>

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
			(based on value present)	
4.28	83	Section 3.6.1 MSH Segment MSH-16-Application Ack Type	MSH-16 Application Acknowledgement Type Usage =CE <i>Update Usage to C(a/b)</i>	Usage is C(R/X) with the Condition Rule: For MSH-21 Message Profile ID PH_SS-Ack^SS Sender^2.16.840.1.114222.4.10.3^ISO or PH_SS-Ack^SS Receiver^2.16.840.1.114222.4.10.3^ISO
4.29	56	TABLE 3.6.10: Message Acknowledgement Segment (MSA) MSA-6	The MSA-6 was deprecated as of v2.4. The reader is referred to the ERR segment. The ERR segment allows for richer descriptions of the erroneous conditions. <i>If this was deprecated then why is it RE usage? Why isn't the ERR segment RE or is the intent is to use MSA-6? This seems to me be unusual.</i>	Added the ERR segment for use with ACKs (still optional). Changed MSA-6 to X usage, [0..0] cardinality since it is deprecated. Also yellow-shaded the row and removed the verbiage that was in the Notes.
4.30	65	3.6.10: Message Acknowledgement Segment (MSA) MSA-6	The MSA-6 was deprecated as of v2.4. The reader is referred to the ERR segment. The ERR segment allows for richer descriptions of the erroneous conditions. MSA-6 Usage is "RE" and should be "X". The ERR segment needs to be added.	For the future guide, adding the ERR segment for use with ACKs (still optional). Changing MSA-6 to X usage, [0..0] cardinality since it is deprecated. Also yellow-shaded the row and removed the verbiage that was in the Notes.

5 DATA ELEMENTS OF INTEREST

General changes within Section 4.2 Syndromic Surveillance Data Elements of Interest are listed in this section.

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
5.1	120	Table 4.2 SYNDROMIC DATA ELEMENTS OF INTEREST – Insurance Coverage	For IN1-15 Insurance Plan ID, use Source of Payment Typology (PHDSC) TABLE 8: IN1-15 Insurance Plan ID	For IN1-15 Insurance Plan Type, use Source of Payment Typology (PHDSC) TABLE 8: IN1-15 Insurance Plan Type

6 VALUE SET CHANGES

For conformance testing, the message elements that specify value sets SHALL be valued from the value sets described in the guide. Optional elements will not be considered for conformance testing, as their associated message elements will not be constrained. (These unconstrained value sets in the guide are still worth consulting; they should be considered suggested usage, reflective of best and

widespread practices, and may possibly become requirements in the future.)

Value sets are defined by their name and Object Identifier (OID) in Public Health Information Network Vocabulary Access and Distribution System (PHIN VADS), which may constrain the original Health Level Seven (HL7) tables and other code systems indicated. PHIN VADS will be used to test content for these elements. The value sets referenced below are changes to the 2.0 version of the Guide.

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
6.1	74	Table 3.6.5 PV2-3 Admit Reason	TABLE 3.6.5 PATIENT VISIT PV2-3 Admit Reason value set reference to ICD-10: PHVS_CauseOfDeath_ICD-10_CDC The list provides ICD-10 codes and associated cause-of-death titles for the most detailed listing of causes of death. This list is maintained by CDC NCHS. <i>Current version references an obsolete ICD-10 value set.</i>	New Value Set: PHVS_AdministrativeDiagnosis_CDC_ICD-10CM (link will not work until the value set is available in PHIN VADS)
6.2	75	DG1-3 Diagnosis	PHVS_AdministrativeDiagnosis_CD C_ICD-10CM Link does not work	PHVS_AdministrativeDiagnosis_CDC_ICD-10CM
6.3	43	Datatype definitions – XAD.4 Extended Address – State or Province component	Value set reference missing	Value Set: PHVS_State_FIPS_5-2
6.4	43	Datatype definitions – XAD.6 Extended Address – Country component	Value set reference missing	Value Set: PHVS_Country_ISO_3166-1
6.5	43	Datatype definitions – XAD.9 Extended Address – County/ Parish Code component	Value set reference missing	Value Set: PHVS_County_FIPS_6-4
6.6	71	TABLE 3.6.5 PATIENT VISIT PV1- 2 Admit Reason value set reference to ICD-10	PHVS_CauseOfDeath_ICD-10_CDC The list provides ICD-10 codes and associated cause-of-death titles for the most detailed listing of causes of death. This list is maintained by CDC NCHS.	Value Set: PHVS_AdministrativeDiagnosis_CDC_ICD-10CM ICD-10 CM Administrative Diagnosis Codes used for billing purposes, Reason for Study, DG1 Diagnosis segments.
6.7	83	OBX-6 Units	PHVS_AgeUnit_SyndromicSurveillance Link does not work	PHVS_AgeUnit_SyndromicSurveillance

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
6.8	132	SECTION 5, APPENDIX A – CODE TABLES – Diagnosis/Injury Codes	<p>This value set is for future use. This value set is made from CDC NCHS ICD-10 subset that has been used for reporting mortality (WHO mandate).</p> <p>Note: Include ICD-9-CM V-codes and E-codes. When the primary diagnosis code is an injury, also provide one or more supplemental external-cause-of-injury codes or E-codes. E-codes provide useful information on the mechanism and intent of injury, place of occurrence, and activity at the time of injury. This also applies to ICD-10-CM (when it is implemented) where V, W, X, Y and selected T codes represent external cause of injury codes.</p>	<p>Value Set: PHVS AdministrativeDiagnosis CDC IC D-10CM</p> <p>This value set is the entire CDC NCHS ICD-10 code system.</p> <p>Note: Include ICD-10-CM where V, W, X, Y and selected T codes represent external cause of injury codes.</p>

Note: All the value sets associated with syndromic surveillance can also be downloaded using the following link:

[http://phinivads.cdc.gov/vads/ViewView.action?name=Syndromic Surveillance](http://phinivads.cdc.gov/vads/ViewView.action?name=Syndromic%20Surveillance).

7 MESSAGE STRUCTURE CHANGES

For conformance testing, the message structures should address the complete structure from the 2.5.1 standard. The ADT and ACK message structures in Section 3.5 are therefore updated as follows.

Item #	Page #	Location/Field Name	Comment / Change / Issue	Revision / Resolution
7.1	46	Section 3.5 MESSAGE TYPES - Narrative	The HL7 message formats sent to public health agencies will be constrained versions of the 2.5.1 abstract message types listed below. Only the segments necessary for carrying the syndromic data, and certain structural message segments, are included.	The HL7 message formats sent to public health agencies will be constrained versions of the 2.5.1 abstract message types listed below. Only the segments necessary for carrying the syndromic data, and certain operational message segments, are included.
7.2	48	TABLE 3.5.3: ADT^A01 ADMIT / VISIT NOTIFICATION	Does not follow the message structure from the standard (2.5.1). The complete message structure is not given in this table. What is the default for the unspecified segments? What is specified in the base standard or X (not supported)? For example, the SFT segment is optional and may repeat in the base, is this the way it is to be interpreted here and validated as such?	ADT Messages starting with Table 3.5.3: Updated the all of the messages to address all the message structure per 2.5.1 standard Set the Insurance Group to Optional with the IN1 segment Required if the Insurance Group is used. Set the Procedure Group to Optional with the PR1 segment Required if the Procedure Group is used
7.3	48	TABLE 3.5.3 Admit / Visit Notification Message (ADT^A01)	TABLE 3.5.3 Admit / Visit Notification Message (ADT^A01) <i>Need entire message structure and for IN1 to be Optional rather than RE</i>	(see revisions below) TABLE 3.5.3 Admit / Visit Notification Message (ADT^A01)
7.4	49	TABLE 3.5.4 Register a Patient Message (ADT^A04)	TABLE 3.5.4 Register a Patient Message (ADT^A04) <i>Need entire message structure and for IN1 to be Optional rather than RE</i>	(see revisions below) TABLE 3.5.4 Register a Patient Message (ADT^A04)
7.5	50	TABLE 3.5.5 Update Patient Information (ADT^A08)	TABLE 3.5.5 Update Patient Information (ADT^A08) <i>Need entire message structure and for IN1 to be Optional rather than RE</i>	(see revisions below) TABLE 3.5.5 Update Patient Information (ADT^A08)
7.6	51	TABLE 3.5.6 Discharge / End Visit (ADT^A03)	TABLE 3.5.6 Discharge / End Visit (ADT^A03) <i>Need entire message structure and for IN1 to be Optional rather than RE</i>	(see revisions below) TABLE 3.5.6 Discharge / End Visit (ADT^A03)
7.7	52	Table 3.9.1: ACK^A01 ACK^A04 ACK^A08 ACK^A03 Acknowledgement Message	Table 3.9.1: ACK^A01 ACK^A04 ACK^A08 ACK^A03 Acknowledgement Message	(see revisions below) Table 3.5.7: ACK^A01 ACK^A04 ACK^A08 ACK^A03 Acknowledgement Message

7.1 TABLE 3.5.3 ADMIT / VISIT NOTIFICATION MESSAGE (ADT^A01)

TABLE 3.5.3: ADT^A01^ADT_A01 ADMIT / VISIT NOTIFICATION			
Seg	Name	Usage	Cardinality
MSH	Message Header	R	[1..1]
[{ SFT }]	Software Segment	O	[0..*]
EVN	Event Type	R	[1..1]
PID	Patient Identification	R	[1..1]
[PD1]	Additional Demographics	O	[0..1]
[{ ROL }]	Role	O	[0..*]
[{ NK1 }]	Next of Kin / Associated Parties	O	[0..*]
PV1	Patient Visit	R	[1..1]
[PV2]	Patient Visit Additional Information	RE	[0..1]
[{ ROL }]	Role	O	[0..*]
[{ DB1 }]	Disability Information	O	[0..*]
[{ OBX }]	Observation / Result	R	[1..*]
[{ AL1 }]	Allergy Information	O	[0..*]
[{ DG1 }]	Diagnosis Information	RE	[0..*]
[DRG]	Diagnosis Related Group	O	[0..1]
[{	--- PROCEDURE begin	O	[0..*]
PR1	Procedures	R	[1..1]
[{ ROL }]	Role	O	[0..*]
}]	--- PROCEDURE end		
[{ GT1 }]	Guarantor	O	[0..*]
[{	--- INSURANCE begin	O (formerly RE)	[0..*]
IN1	Insurance	R	[1..1]
[IN2]	Insurance Additional Information	O	[0..1]
[{ IN3 }]	Insurance Additional Info - Cert	O	[0..*]
[{ ROL }]	Role	O	[0..*]
}]	--- INSURANCE end		
[ACC]	Accident Information	O	[0..1]
[UB1]	Universal Bill Information	O	[0..1]
[UB2]	Universal Bill 92 Information	O	[0..1]
[PDA]	Patient Death and Autopsy	O	[0..1]

7.2 TABLE 3.5.4 REGISTER A PATIENT MESSAGE (ADT^A04)

TABLE 3.5.4: ADT^A04^ADT_A01 REGISTER A PATIENT			
SEG	NAME	USAGE	CARDINALITY
MSH	Message Header	R	[1..1]
[{ SFT }]	Software Segment	O	[0..*]
EVN	Event Type	R	[1..1]
PID	Patient Identification	R	[1..1]
[PD1]	Additional Demographics	O	[0..1]
[{ ROL }]	Role	O	[0..*]
[{ NK1 }]	Next of Kin / Associated Parties	O	[0..*]
PV1	Patient Visit	R	[1..1]
[PV2]	Patient Visit Additional Information	RE	[0..1]
[{ ROL }]	Role	O	[0..*]
[{ DB1 }]	Disability Information	O	[0..*]
[{ OBX }]	Observation / Result	R	[1..*]
[{ AL1 }]	Allergy Information	O	[0..*]
[{ DG1 }]	Diagnosis Information	RE	[0..*]
[DRG]	Diagnosis Related Group	O	[0..1]
[{	--- PROCEDURE begin	O	[0..*]
PR1	Procedures	R	[1..1]
[{ ROL }]	Role	O	[0..*]
}]	--- PROCEDURE end		
[{ GT1 }]	Guarantor	O	[0..*]
[{	--- INSURANCE begin	O (formerly RE)	[0..*]
IN1	Insurance	R	[1..1]
[IN2]	Insurance Additional Information	O	[0..1]
[{ IN3 }]	Insurance Additional Info - Cert	O	[0..*]
[{ ROL }]	Role	O	[0..*]
}]	--- INSURANCE end		
[ACC]	Accident Information	O	[0..1]
[UB1]	Universal Bill Information	O	[0..1]
[UB2]	Universal Bill 92 Information	O	[0..1]
[PDA]	Patient Death and Autopsy	O	[0..1]

7.3 TABLE 3.5.5 UPDATE PATIENT INFORMATION (ADT^A08)

TABLE 3.5.5: ADT^A08^ADT_A01 UPDATE PATIENT INFORMATION			
SEG	NAME	USAGE	CARDINALITY
MSH	Message Header	R	[1..1]
[{ SFT }]	Software Segment	O	[0..*]
EVN	Event Type	R	[1..1]
PID	Patient Identification	R	[1..1]
[PD1]	Additional Demographics	O	[0..1]
[{ ROL }]	Role	O	[0..*]
[{ NK1 }]	Next of Kin / Associated Parties	O	[0..*]
PV1	Patient Visit	R	[1..1]
[PV2]	Patient Visit Additional Information	RE	[0..1]
[{ ROL }]	Role	O	[0..*]
[{ DB1 }]	Disability Information	O	[0..*]
[{ OBX }]	Observation / Result	R	[1..*]
[{ AL1 }]	Allergy Information	O	[0..*]
[{ DG1 }]	Diagnosis Information	RE	[0..*]
[DRG]	Diagnosis Related Group	O	[0..1]
[{	--- PROCEDURE begin	O	[0..*]
PR1	Procedures	R	[1..1]
[{ ROL }]	Role	O	[0..*]
}]	--- PROCEDURE end		
[{ GT1 }]	Guarantor	O	[0..*]
[{	--- INSURANCE begin	O (formerly RE)	[0..*]
IN1	Insurance	R	[1..1]
[IN2]	Insurance Additional Information	O	[0..1]
[{ IN3 }]	Insurance Additional Info - Cert	O	[0..*]
[{ ROL }]	Role	O	[0..*]
}]	--- INSURANCE end		
[ACC]	Accident Information	O	[0..1]
[UB1]	Universal Bill Information	O	[0..1]
[UB2]	Universal Bill 92 Information	O	[0..1]
[PDA]	Patient Death and Autopsy	O	[0..1]

7.4 TABLE 3.5.6 DISCHARGE / END VISIT (ADT^A03)

TABLE 3.5.6: ADT^A03^ADT_A03 DISCHARGE/END VISIT			
SEG	NAME	USAGE	CARDINALITY
MSH	Message Header	R	[1..1]
[{ SFT }]	Software Segment	O	[0..*]
EVN	Event Type	R	[1..1]
PID	Patient Identification	R	[1..1]
[PD1]	Additional Demographics	O	[0..1]
[{ ROL }]	Role	O	[0..*]
[{ NK1 }]	Next of Kin / Associated Parties	O	[0..*]
PV1	Patient Visit	R	[1..1]
[PV2]	Patient Visit Additional Information	RE	[0..1]
[{ ROL }]	Role	O	[0..*]
[{ DB1 }]	Disability Information	O	[0..*]
[{ AL1 }]	Allergy Information	O	[0..*]
[{ DG1 }]	Diagnosis Information	RE	[0..*]
[DRG]	Diagnosis Related Group	O	[0..1]
[{	--- PROCEDURE begin	O	[0..*]
PR1	Procedures	R	[1..1]
[{ ROL }]	Role	O	[0..*]
}]	--- PROCEDURE end		
[{ OBX }]	Observation / Result	R	[1..*]
[{ GT1 }]	Guarantor	O	[0..*]
[{	--- INSURANCE begin	O (formerly RE)	[0..*]
IN1	Insurance	R	[1..1]
[IN2]	Insurance Additional Information	O	[0..1]
[{ IN3 }]	Insurance Additional Info - Cert	O	[0..*]
[{ ROL }]	Role	O	[0..*]
}]	--- INSURANCE end		
[ACC]	Accident Information	O	[0..1]
[PDA]	Patient Death and Autopsy	O	[0..1]

7.5 TABLE 3.5.7 ACKNOWLEDGEMENT MESSAGE (ACK^A01) (ACK^A04) (ACK^A08) (ACK^A03)

TABLE 3.9.1: ACK^A01 ACK^A04 ACK^A08 ACK^A03 ACKNOWLEDGEMENT MESSAGE				
SEG	NAME	DESCRIPTION	USAGE	CARDINALITY
MSH	Message Header	Information explaining how to parse and process the message. This includes identification of message delimiters, sender, receiver, message type, timestamp, etc.	R	[1..1]
MSA	Message Acknowledgement	Acknowledgement information identifying the ability of a receiver to accept a message transmitted	R	[1..1]

Has been revised to:

TABLE 3.5.7: ACK^A01 ACK^A04 ACK^A08 ACK^A03 ACKNOWLEDGEMENT MESSAGE			
SEG	NAME	USAGE	CARDINALITY
MSH	Message Header	R	[1..1]
[{ SFT }]	Software Segment	O	[0..*]
MSA	Message Acknowledgement	R	[1..1]
[{ ERR }]	Software Segment	O	[0..*]

8 GENERAL CLARIFICATIONS

The scope of the conformance requirements will only address sender behavior. All actions on the part of the receiver, including acknowledgements, are not covered by the conformance requirements.

The conformance requirements do not specify transport in order to give state and local public health agencies the flexibility to specify their preferred means of transport.

Any references to use of HL7 v. 2.3.1 in the guide are irrelevant for the purpose of this addendum. The conformance requirements in this addendum mandate the use of HL7 v. 2.5.1.

The goal of certification testing is to ensure systems have the capability to support Required, Required Empty, and Conditional elements. Vendors may develop systems that include much more but can be configured to a particular need.